

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 29, 1999

Application or Docket Number

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

| FOR                              | NUMBER FILED   | NUMBER EXTRA |
|----------------------------------|----------------|--------------|
| BASIC FEE                        |                |              |
| TOTAL CLAIMS                     | 18 minus 20= * |              |
| INDEPENDENT CLAIMS               | 12 minus 3 = * | 9            |
| MULTIPLE DEPENDENT CLAIM PRESENT |                |              |

SMALL ENTITY  
TYPE

OTHER THAN  
SMALL ENTITY  
OR

|        |        |        |         |
|--------|--------|--------|---------|
| RATE   | 345.00 | RATE   | 690.00  |
| OR     |        | OR     |         |
| X\$ 9= |        | X\$18= |         |
| OR     |        | OR     |         |
| X39=   |        | X78=   | 72.00   |
| OR     |        | OR     |         |
| +130=  |        | +260=  |         |
| OR     |        | OR     |         |
| TOTAL  |        | TOTAL  | 1392.00 |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | *     | Minus                                       | **               |
| Independent                                    | *   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |

SMALL ENTITY

OTHER THAN  
SMALL ENTITY  
OR

|                     |                        |                     |                        |
|---------------------|------------------------|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| OR                  |                        | OR                  |                        |
| X\$ 9=              |                        | X\$18=              |                        |
| OR                  |                        | OR                  |                        |
| X39=                |                        | X78=                |                        |
| OR                  |                        | OR                  |                        |
| +130=               |                        | +260=               |                        |
| OR                  |                        | OR                  |                        |
| TOTAL<br>ADDIT. FEE |                        | TOTAL<br>ADDIT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | *     | Minus                                       | **               |
| Independent                                    | *   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |

RATE  
ADDI-  
TIONAL  
FEE

RATE  
ADDI-  
TIONAL  
FEE

|                     |                        |                     |                        |
|---------------------|------------------------|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| OR                  |                        | OR                  |                        |
| X\$ 9=              |                        | X\$18=              |                        |
| OR                  |                        | OR                  |                        |
| X39=                |                        | X78=                |                        |
| OR                  |                        | OR                  |                        |
| +130=               |                        | +260=               |                        |
| OR                  |                        | OR                  |                        |
| TOTAL<br>ADDIT. FEE |                        | TOTAL<br>ADDIT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------|---|------------------|
|  | Total                                     | *     | Minus                                       | **               |
| Independent                                    | *   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   |                  |

RATE  
ADDI-  
TIONAL  
FEE

RATE  
ADDI-  
TIONAL  
FEE

|                     |                        |                     |                        |
|---------------------|------------------------|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| OR                  |                        | OR                  |                        |
| X\$ 9=              |                        | X\$18=              |                        |
| OR                  |                        | OR                  |                        |
| X39=                |                        | X78=                |                        |
| OR                  |                        | OR                  |                        |
| +130=               |                        | +260=               |                        |
| OR                  |                        | OR                  |                        |
| TOTAL<br>ADDIT. FEE |                        | TOTAL<br>ADDIT. FEE |                        |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.